

POSITION	INITIALS	ID NO.	DATE
<b>FEEDETERMINATION</b>			
<b>O.I.P.E. CLASSIFIER</b>		48	11/21/00
<b>FORMALITY REVIEW</b>	JM	5C864	01/19/01
<b>RESPONSE FORMALITY REVIEW</b>	ACT	571	04/21/01

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

Claim	Date
Final	
Original	
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Claim	Date
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If more than 150 claims or 10 actions  
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